

Unit 109 Bn. C.E.F. Rank Lieut. Name George Jilly

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (a) What is your Surname? Jilly
- (b) What are your Christian Names? Thomas George
2. (a) Where were you born? (State place and country) Port Hope Ont.
- (b) What is your present address? Lindsay Ont.
3. What is the date of your birth? April 24th 1896
4. What is (a) the name of your next-of-kin? Thomas J Jilly
- (b) the address of your next-of-kin? Lindsay Ont.
- (c) the relationship of your next-of-kin? Father
5. What is your profession or occupation? Bank Clerk
6. What is your religion? Presbyterian
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? 45th Regt.
9. State particulars of any former Military Service. 2 years 45th Regt.
10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

George Jilly Lieut. (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* Fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date May 25th 1916

Place Lindsay

*Insert here "fit" or "unfit"

H O Boyd Capt.
Medical Officer.

109th Overseas Battalion, C. E. F.

OFFICERS' DECLARATION PAPER
CANADIAN OVERSEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

ANSWERS

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CERTIFICATE OF MEDICAL EXAMINATION

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19-2-19 80

Officer's
DISCHARGE DOCUMENTS

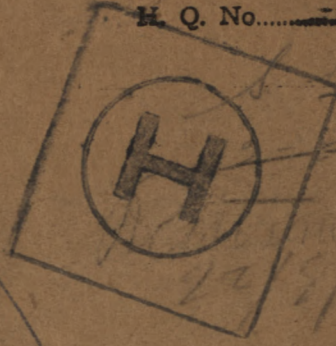
R. O. No.....
H. O. No.....

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *2 34*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... *3*
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... *2*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name *TILLY THOMAS GEORGE*
 Regt. No. _____ Rank *Private*
 Corps *109th Bn*

CANADIAN FORCES
 RECORDS & PERS JACKET ROOM

12626



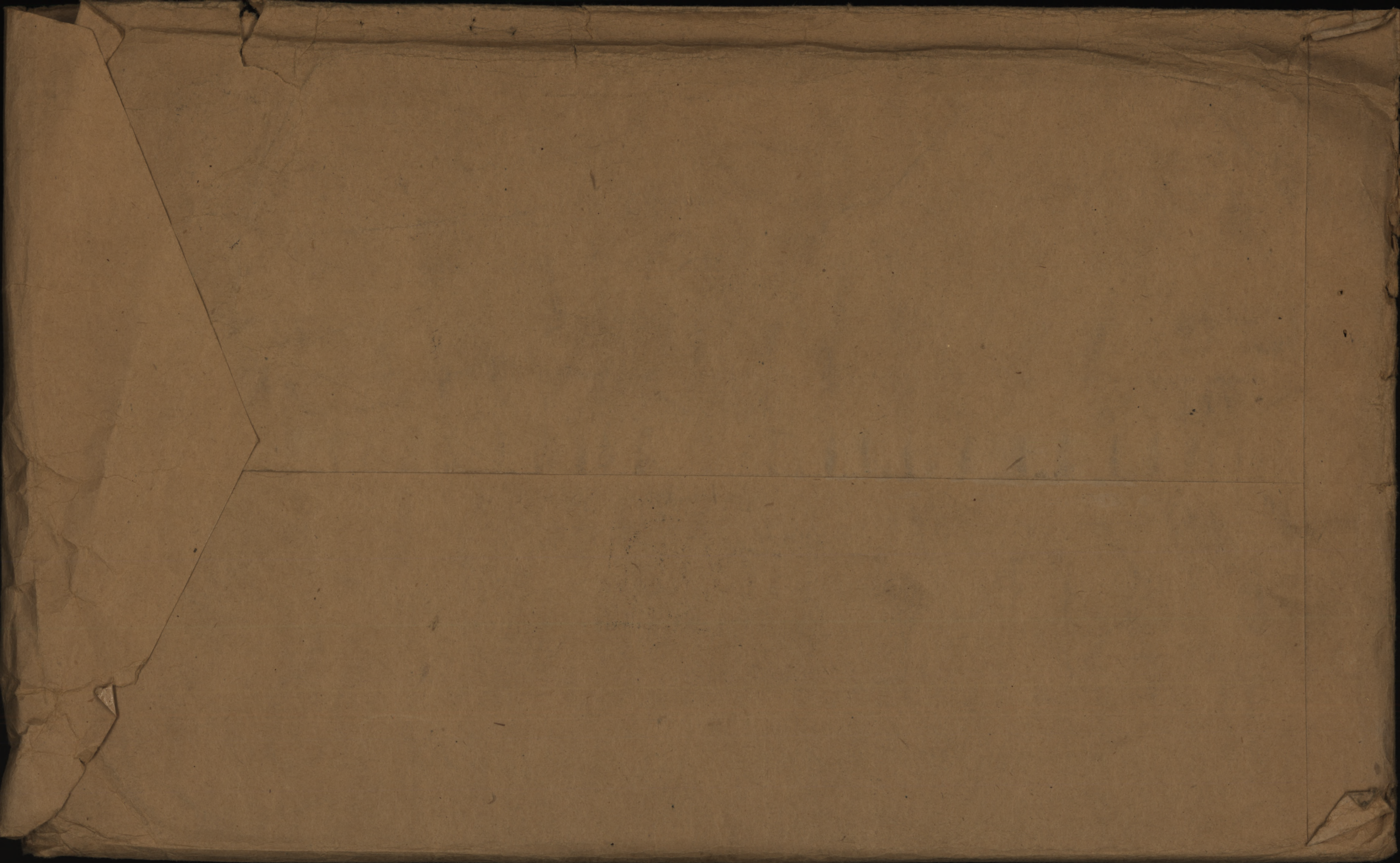
Box 483423

a. & a. 45-8
m. & w. 67-2.

3 Parc
cards

M. F. W. 62.
 100m.-6-17.
 H. Q. 1772-39-935.
Ref a.m.S. 0536.

7
2-12
2-12



SURNAME.

Tilly

M.C. 31158

23 CARD NO.

Demst

CHRISTIAN NAMES

Thomas George

1/2/19

S.O.S. 30/12/18.

FOLL.

S.O. 7/7/19.

S.O.S.

REGL. NO.

RANK

Lieut

UNIT

109th 75th

Bn.

FORMER CORPS

45th Regt. (2 years)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Tilly Thomas J.

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Lindsay, Ont.

COUNTRY OF BIRTH

Canada. Port Hope, Ont.

DATE

Apr. 24th 1896

PLACE OF ATTESTATION

DATE

Sailed from Halifax

23/7/16⁴⁸⁸ per S.S. "Olympic"

L. L. 94504. M. & D. 6512

M. F. W. 22. 250M.-2.16. H. Q. 1772-39-339.

arith 70v bravo m 55-61-11-6-17.

R/c 14/12/18. 240/5

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Bank Clerk

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Barriefield, Ont.

DATE

July 12th 1916

Present address: Lindsay, Ont

REGT'L. NO. _____

NAME

Lilly, Thomas George

H. Q. FILE NO 649

RANK AND CORPS

Lieut. 75th. Bn. (Form 109th. Bn.)

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

*N of R. Thomas J. Lilly (Father.)
Lindsay Det.**Q. 1196 7-9-18 Rept. Wdd. Sept. 2nd. 18.**H.L. 1090-1 2-3*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

1082-4	4th South. Gen. Plymouth	6-9-18	G.W.L. arm alt.
1124-5	Can. Conv Officers	Matlock Bath	11-10-18. G.S.W arm P.
1149	& " " " " "	31-10-18	(Hessich) " "

REGT'L. No.

NAME

Tilly Thomas George

H. Q. FILE No. 649

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

NO.	DATE	NATURE OF CASUALTY	FOLLOWS
M 5561	11-6-17	Rept Wounded June 8 th 1917. ✓	
M 5-628	28-6-17	24 Gen Hosp Staples S.S.W. Left under further enquiries will be made.	
M 5676	5-7-17	O.C. #24 Gen Hosp Staples reports June 30/17. Convalescent. now he will be fit for duty shortly.	
W. 57M.			
J. 361-1	13-1-18	Rept. Wd Jan 9 th 1918. ✓	
6-706 W.S. 24	5-1-18	S.S.W. Lt leg healed leg stiff able to walk Mustard gas burn Rt hip. groin healing satisfactory Gen Caution good under treatment for a short time	

L. L. 31493. M. & D. 8476

M. F. W. 42-100M.-28-11-17.

H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
640	Wistebuff Can Co. E	24-3-17	Tonsillitis
65-9	Co " " " ^{Folkersham}	12-4-17	" (Disch)
698	Rept from Base	8-6-17	Wounded (75th Bn)
701	#24 Gen Staples	10-6-17	Gsw. L. Ankle sht.
730	Disch to Base Rept	14-7-17	" " " " " "
879	Rept from Headquarters		Wounded 9-1-18.
884(2)	^{2nd} West Gen Manchester	13-7-18	Gsw. L. Leg sht.
881 (1)	24 Gen Staples	12-1-18	Gsw Lt Leg sht.
916-3.	Discharged.	19-2-18.	" " " "
977 -	59 Cas. Sdg. Stat.	4-5-18	Influenza
1034 -	4 Can. Cas. Sdg. Stat.	6-7-18	Balanitis.
1049 -	4 " " " "	26-7-18	" Dis. to duty
1081-3	20 Gen. Cameron 4	9-18	Gsw L. arm sht.

Number

Rank

Lieut

~~B~~

Surname

TILLY.

~~X~~

Christian Name

THOMAS GEORGE.

Units

Theatre of War

France

Date of Service

23-7-16

3/5/17

5-12-18.

Remarks

M.C.O.R.

Lindsay, Ont.

Latest Address

Roll No

~~B~~
Page 8918

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued.....

Yes
No

Date.....

Character on discharge.....

Previous occupation.....

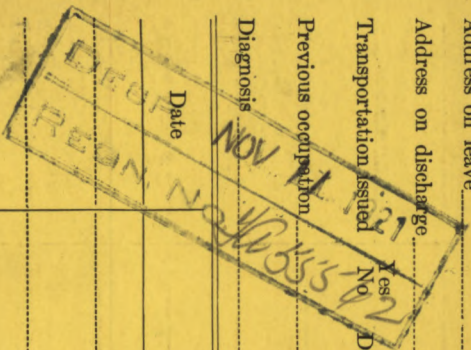
Date and place of enlistment.....

Diagnosis.....

Date of Medical Boards.....

Date.....

Remarks.....



*—Name will be given in full; surname first.

Name **TILLY** Rank **Lieut.** Reg. No. _____
 Unit **Thomas George**
~~12th Res. Bn.~~ **75th Bn**
 Next of Kin **Canada**

W.S.M.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
29.3.17	West Cliff E.&E. Hosp.	F'Stone	Tonsillitis	640		
12-4-17	<i>Discharged</i>			<i>659</i>		
8-6-17	<i>Rep from Base Wounded</i>			<i>698</i>	<i>m 536</i>	<i>12/6</i>
10-6-17	<i>24 Sin Sts Expts</i>	<i>SW Ankle Slt</i>		<i>701</i>		
14-7-17	<i>Disch to Base Depot</i>			<i>730</i>		
4-5-18	<i>59 back to Stn</i>	<i>(17923)</i>	<i>Influenza</i>	<i>999</i>		
6-7-18	<i>H. back to Stn</i>	<i>33034</i>	<i>Dysentery</i>	<i>1034</i>		
26-7-18	<i>Disch to ady</i>	<i>84020</i>		<i>1049</i>		

Surname *Lilley*.....
Christian names *George*.....
Regtl. No. Rank *Lt.*.....
Unit.....

H. Q.
M. D. No. *03*.....
T. O. S. 19....
D. O. Pt. II of.....
S. O. S. *23/6/19. bn. unit.* *30-12-19. 18.3*.....
Reason *Demob.*.....

Next of kin.....
Address.....
.....
.....
.....

Auth. *R.O. 1498. "b"*
R.O. 2063. 7/7/19.
Relationship *D.O. 192-11-7-19#310*
D.O. 205-24-7-19#310.....
Also notify:.....

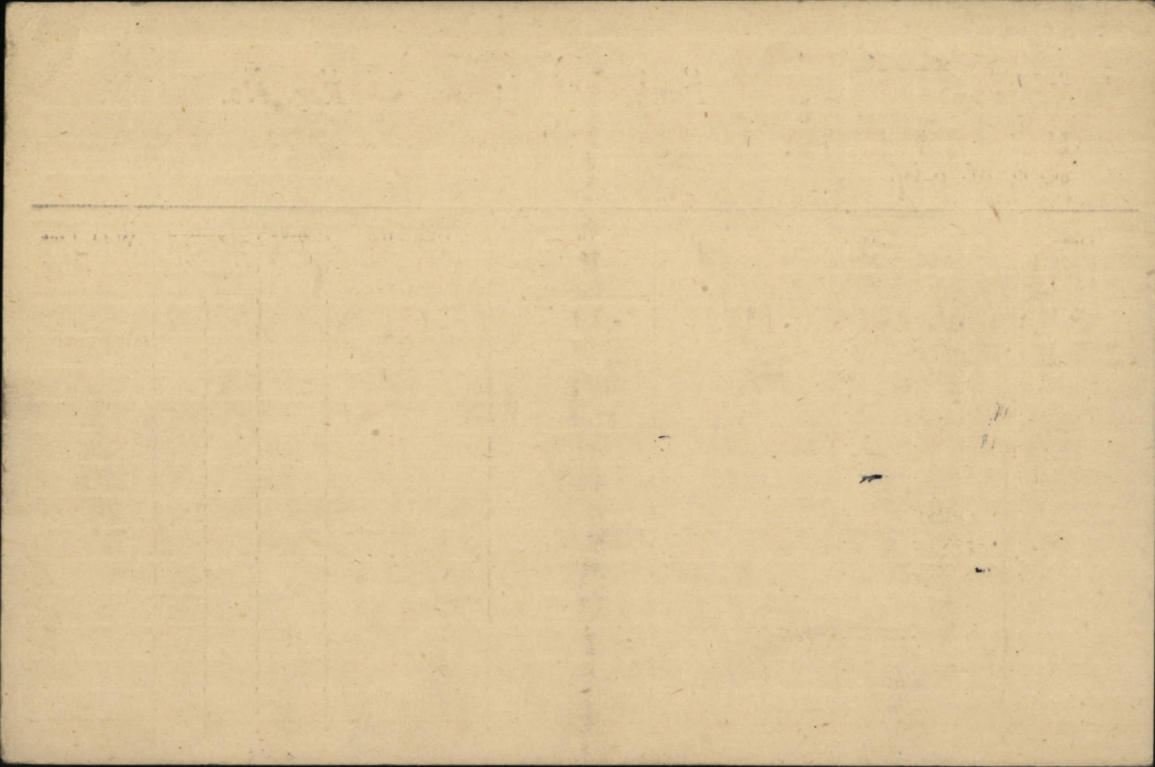
BORN—Place..... Date.....
ATTESTED—Place..... Date.....
O/S..... R/C.....



Name [✓] TILLY
 Thomas. George Rank Lieut. [✓]
 Unit 75th Bn. [✓]
 Next of Kin Canada

Reg. No.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
9-1	Rep. from GHQ. (1226 12-1)		<u>WOUNDED</u>	9,879	036	14/1/18.
12-1-18	24 Gen Hosp. Etaples (WV) G.S.W. L. by 881			884	Still in	
13-1-18	2nd West Gen Hosp. Manchester (10632)			884	30/1/18.	
19-2-18	Discharged (7003)			916		



Name **TILLY**

Unit

Next of Kin

Rank

Thomas George
75th Battn.

LIEUT

Reg. No.

Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
2-9	Reported from Base (KI941)		WOUNDED	1080	1106	9/9
4-9	20 km Hos. Camer (wo) Gwalan R		Set	1081		
6-9	Hos. G. Ho. Plymouth Hos. (3056)			1082		
11-10-18	Can. Con. Off. Hos., Matlock Bath	7001		1124		
31-10-18	Discharged	7003		1149		

No.

RANK

Lieut.

NAME

Willy. George

T. O. S.

UNIT

109th. Battalion.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 6	1915 Dec 31	✓	Asst. for Duty & Inst. 6-12-15	D. O. 114 6-12-15-
1916.	1916	✓		
	Jan.	✓		
	Feb.	✓		
	Mar.	✓		
	April	✓		
	May	✓		
	June	✓		
	July	✓		

UNIT SAILED

JUL 23 1916



Surname

Christian Name

Reg. No.

TILLEY

T. G.

DMS. 4-T-271.

Rank

Unit

Lieut.

12th. Res. Batt. 75th. Batt'n.

MEDICAL BOARD held at

Date

Serial No.

(1) Shorncliffe

11-4-17.

Other Medical Boards at

Date

Serial No.

(2) do.

21-4-17.

London Area

20-2-18.

(3) do.

14-3-18.

(4) Matlock Bath

26-10-18.

(5)

Condition found by Board

Tonsillitis. G.S.W.lt.Leg. GSW.lt.Arm Fract.

Disposition Recommended

Humerus.

(1) Unfit any service 10 days

(2) Fit General service.

Unfit lt.Duty 3 weeks, Home ser. 1 month & 3

(3) weeks, Gen. ser. 2 months.

Fit for General service.

(4) Fit for General service.

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks

A.M.D. 2 DEPT.

Gen. of D.G.N.S. O.M.F.C. London.

Tilly. T. G.

Lieut. 12th. Res. Bn. 75th. Batt.

Westcliff Eye & Ear. Folkestone. 29-3-17.
 No. 24 Gen. Hospital Etaples 10-6-17
 No. 24 General Hospital, Etaples. 9-1-18.
 H.S. to 2nd. Western Gen. Hosp. Manchester 13-1-18
 No. 59 Casualty Clg. Station. 4-5-18.
 No. 4 Canadian Casualty Clg. Station. 6-7-18.
 No. 20 General Hospital, Camiers 4-9-18.
 H.S. to 4th. South. Gen. Hosp. Plymouth 6-9-18.
 Canadian Conval. Offs. Hosp. Matlock 11-10-18

Tonsillitis.

Reported from Base WOUNDED:-8-6-17

G.S.W.lt. Ankle slt. *R*

Reported from G.H.Q., Wounded:-9-1-18.

G.S.W.lt. Leg slt.

Influenza. *Rw.*

Balanitis.

R.F.B., Wounded:-2-9-18.

GSW.lt. Arm slt. Disch. 12-4-17

Dis. to Base. :-14-7-17.

Discharged:-19-2-18.

Disch. to Duty:-26-7-18.

Discharged:-31-10-18.

C.L. 3-4-17. 640-3.

27-4-17 659-3.

12-6-17 698.

15-6-17 701. C.L. 7-9-18 1080.

20-7-17 730. 9-9-18 1081-3.

12-1-18 879. 10-9-18 1082-4.

15-1-18 881. 29-10-18 1124-5.

18-1-18 884-2. 27-11-18 1149-6.

25-2-18 916-3.

9-5-18 977.

16-7-18 1034.

2-8-18 1049.

of D.G.M.S. O.M.F.C. London.

R.

Original not available

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Jilly Christian Name T. J. G.

Examined { on 25th day of May 1916
 at Lindsay

Approved by H. O. Boyd
 Rank Captain. M.O.

Birthplace { City or Town Pott Hope.
 County Ontario

Apparent age 30 ?

Trade or occupation Bank Clerk.

Height 5 Feet 9 Inches.

Weight 150. Lbs.

FOR YOU
M.H.S. 21
Army Co
No 479

Chest measurement { Minimum 32 inches.
 Maximum expansion 39 inches.

development Good.

Pox Marks none

Vaccination Marks { Arm Right. Left.
 Number one

When Vaccinated last Feb 10-16.

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	VACCINATIONS.
<u>10-2-16</u>	<u>J. McCulloch.</u>	M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>27-4-16</u>	<u>J. McCulloch.</u>	M.O.
<u>5-5-16</u>	<u>" "</u>	M.O.
<u>15-5-16</u>	<u>" "</u>	M.O.
<u>10-11-15</u>	<u>H. Boyd.</u>	M.O.

Enlisted on 25th day of May 1916 at Lindsay.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn.</u>			
Transferred to	<u>12th Batt</u>	<u>Lieut.</u>		
	<u>75th Bn.</u>			
	<u>12th Regt.</u>			
	<u>75th Bn.</u>	<u>1574/18.</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Shorncliffe</u>	<u>11-4-14</u>	<u>Laryngitis</u>	<u>10 days leave</u>
<u>London</u>	<u>20-2-18.</u>	<u>Essel Lig + psalminguis</u>	<u>with much improvement</u>
<u>Muslock Barr</u>	<u>26-10-18</u>	<u>G.S.W. arm L. (fract.)</u>	<u>Major-General</u> <u>PRESIDENT</u> <u>STANDING MEDICAL BOARD.</u> <u>A. J. M. G. M. J.</u>

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

CANADIAN

J. M. G.

Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.		29	3	17	10	4	17	Lonsilitis.	12	Throat now quiet. One week's leave recommended	<i>[Signature]</i>
No. 24 Gen Hpl Etaples.		10	6	17	14	8	17	G. S. W. L. Ankle slt.		Discharged to Base Depot.	701-730 HH. Duplicate Medical History Sheet posted to here.
2 nd WESTERN GENERAL HOSPITAL, MANCHESTER.		13.	1.	18	19.	2.	18	Shell w ^d . L. leg.	38	Onged. 9.1.18. Lo P. Call. w ^d - excised & sutured. 2.2.18 Lonsillitis - headache. Double follicular Lonsillitis. 14.2.18 w ^d healed. Lonsil: better 19.2.18 For dischg.	<i>[Signature]</i>
HYDE PARK SECTION, 4 th SOUTHERN GENERAL HOSPITAL, PLYMOUTH.		6	9	18	10	10	18	G. S. W. left arm	35	Cong. Fract. upper Part of humerus. no loss or nerve injury. Result good	<i>[Signature]</i>
<i>Manchest. Dist</i>		10	10	18	31	10	18	do (Fract. humerus)	21	No appreciable disunion now	<i>[Signature]</i>

CAPT. R.A.M.C. I.S.

for Officer Commanding,
2nd; Western General Hospital.

S.M. 2-20

1 THIS IS TO CERTIFY that (Rank) Lieut.

2 (Name in full) Thomas George TILLY M.C.

3 Enlisted in 109th Bn.

4 CANADIAN EXPEDITIONARY FORCE, on the _____

5 day of _____ 19____ AND WAS APPOINTED TO COMMISSIONED RANK

6 in 109th Bn.

7 CANADIAN EXPEDITIONARY FORCE on the sixth day

8 of December 1915

9 He SERVED in CANADA England and France with

109th Bn, att 124th Bn, 12th Res Bn,

75th Bn, 1st. C.O.R.I., 3rd Det C.G.P.,

and N.D.#3

10 and was STRUCK OFF THE STRENGTH on the 23rd day

11 of June 1919 by reason of gun wounds

12 Dated at Ottawa, this _____ day

13 of _____ 19____

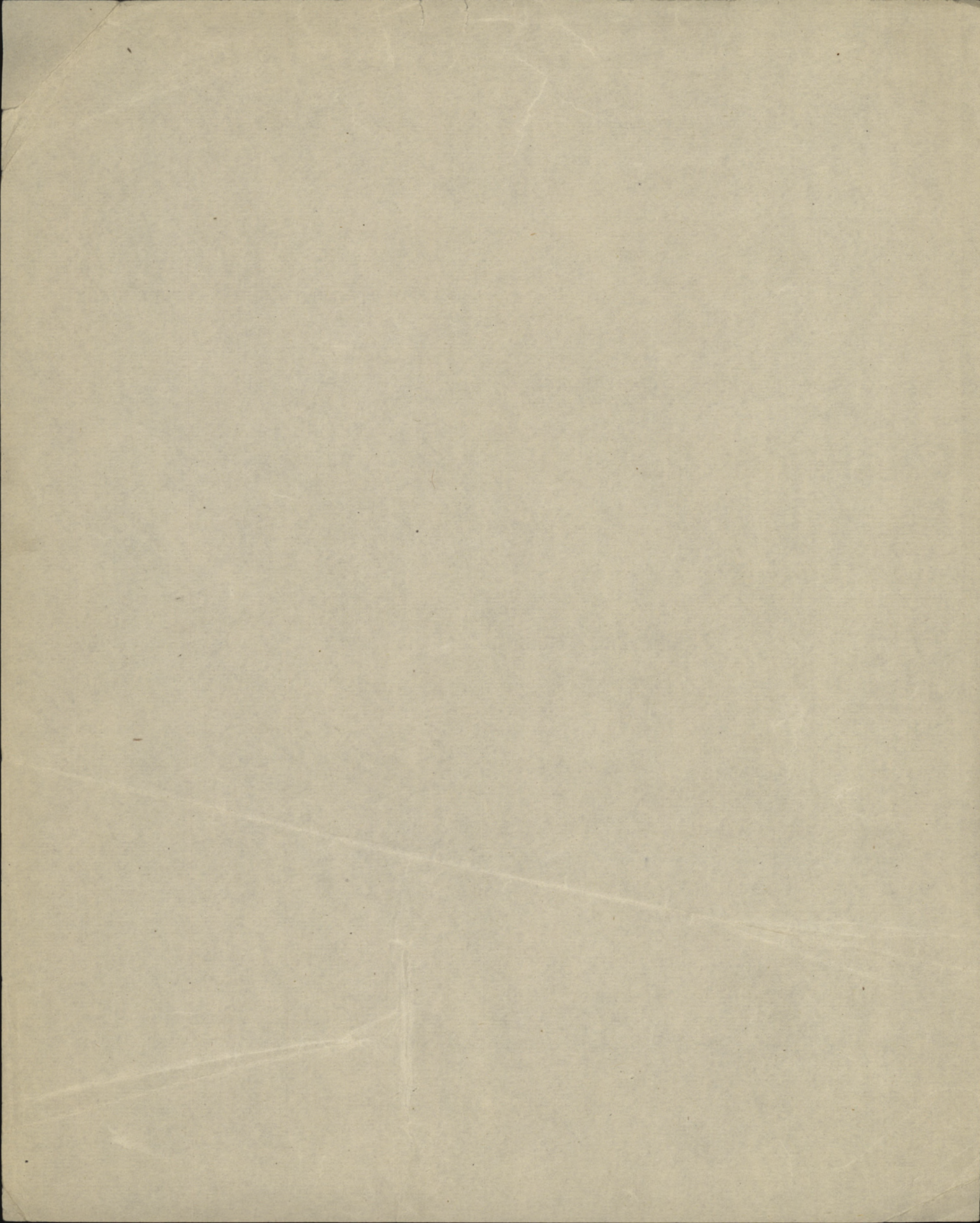
14

awarded the m.c. S.G. 31158-1-2-19

wounded 8-6-17

" 9-1-18

" 2-9-18



ET.

Rank and Name

TILLY, Thomas George *MC* Lieut.

Regimental No.

Name and Address of Next-of-Kin

Father.

Unit 109th Battn.

Thomas J. Tilly.

Date of enlistment

Lindsay, Ontario. Canada.

Place of birth Port Hope. Ontario. Canada.

Married (Yes or No)

No.

Date and place of discharge

If in Permanent Force

Reason for discharge

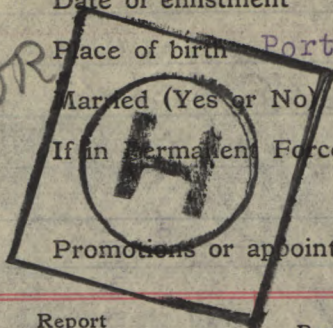
Character on discharge

Promotions or appointments

LEFT CANADA 23-7-18

12 hrs to 1/10/18

COR



★ 1ST, C, O. R.

REMARKS
Taken from Official Documents

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS
Date	From whom received				
1	21-12-16	134 th Bn	Attached for duty to 134 th Bn	20-12-16	PT 11 ord 297 PLE ord 348. 109 th Bn D.O. 992 (5th ser) D.O. 1349 (1st Lt)
2	10-3-17	-	ceases to be attached 134 th Bn. Transfer to 12 th Res Bn.	10-3-17	Pl. II. Ord 69. Pl. II. 765 (12 th Res)
3	3.4.17	C.R.O.	Adm. Westcliffe Ex. E. Hosp. Edgestone	12.4.17	Pl. 659
	10.4.17	14 th Res Bn.	Found unfit any service 3rd cl. by Med Bd.	29.3.17	C.L. 640 109 th Bn 109 th Bn
4	14.5.17	75 th Bn	Having arrived from England 2.O.S.	11.4.17	Pl. 110.100
5	12.6.17	C.R.O.	Reported base wounded	3.5.17	Pl. 2073
5	15.6.17	C.R.O.	Adm 24 General Hospital ^{back to Base Depot} Chaples	8.6.17	Pl. 698
	13.10.17	45 th Bn	Granted 10 days leave	14.4.17	Pl. 2430
6	12.1.18	C.R.O.	Reported from G. Hq. Wounded	10.6.17	Pl. 401 J.W. Hankle Sgt.
6	15.1.18	C.R.O.	Adm 24 General Hospital Chaples	28.9.17	Pl. 114
	21.1.18	1 COB. 10	G.O.S. on evacuation from France	9.1.18	Pl. 849
	25-1-18	45 th Bn	Invalided wd & detached 1 COB. 10	12.1.18	Pl. 881 G.S.W. Leg. etc

A.F.B. 102,
31 JAN 1918

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
18.1.18	Ch.O.	Trans 2 Western General Hospital	Manchester	13-1-18	Discharged 19.2.18 1296 884 GSW. Leg. Slt.
19.3.18	12 Res Bn	12 Res Bn	(F.S.D.)	16.3.18	Pho 67 Phoy 1000
16.4.18	12 Res Bn	12 Res Bn	proceeding	15.4.18	191
23.4.18	40 Bn	40 Bn	on arrival from	17.4.18	" 29
9.5.18	Adm S.	Adm S.	Casualty Clearing Station	15.5.18	Pho 974 Flu
16.4.18	B.A.M.S.	4 Bn	"	6.7.18	CL 1034 Belonitis
4.9.18	" 10	Reported from	Bare wounded	26.4.18	CL 1049
9.9.18	" 10	Adm 20 Gen. Hosp.	Camiers	2.9.18	CL 1080
15.9.18	75 Bn	Invalided wounded	det to	4.9.18	CL 1081 GSW, L. Arm Slt.
13.9.18	1 Cold	LOS on evacuation	from France	5.9.18	Pho 254
10.9.18	B.A.M.S.	Adm 4 th Southern Gen. Hosp.	Plymouth	8.9.18	CL 1082
29.10.18	" 10	Adm 6 th Bn Bow Officer	Hosp Malloch Bath	11.10.18	CL 1124
5.11.18	1 CORD	Discharged Hospital	12 Res.	31.10.18	Pho 1149 Pt II, O. 307a 266. 12 Res.
4.12.18	12 Res	S.O.S. to	1 Cold. (pending R.T.C.)	3-12-18	Pho 258 T.S.I. CORD Pt 341
3.1.19	12 Res	Transferred	to Canada upon cessation of hospital	5.1.18	Ro 5137
1.2.19	was	Awarded	M.C.	1.2.19	L.C. 31158 104/8

A.F.B. 102
22 APR 1918

A.F.B. 103
26 SEP. 1918

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

MILITARY DEFENCE
DEC 26 1918
H.Q. CANADA

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. Rank *Lieut* Surname *Lilley George*
(Given name in full)
Unit or Corps *75th Battalion C.E.F.* Birthplace *Port Hope*

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).

1. GENERAL DESCRIPTION:

Physique *normal* Weight *160* lbs. Height *5* ft. *9* in. Colour of Eyes *Gray*
Nutrition *normal*
Pulse *90*
Condition of arteries *normal*
Vision Rt. *D. 46* Left *D. 14*
Hearing (conversational voice) Rt. *20* ft.
Left *21* ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
Scars 1. Lt. knee 2. Lt. calf. Port. 3. Lt. groin. Lt. arm Lt. Hip. all abraded scars

Opinion as to general health and physical condition *Good*

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System *no* Genito Urinary System *no* Cardio-Vascular System *no*
Special Senses *no* Integumentary System *no* Respiratory System *no*
Disturbance of mentality *no* Muscular System *no* Digestive System *no*
Osseous and Joint System *no* Any other general condition *no*

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Officer gives a history of injuring the knee in France and states that a twist or jar in walking causes pain. On Examination there is no abnormality visible X Ray report. No bony lesion visible

B. P. C. FOLIO
FALSE DOCKET
19

DEC 27 1918

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

Date 27-12-18 Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Montreal, Que. (Canada)

Date Dec 16th 1918 Signed W.A. Coon Libb M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature George Jilly Lt.

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

CONFIDENTIAL.

PROCEEDINGS OF A MEDICAL BOARD

assembled at SHORNCLIFFE- on 11-4-17
(19, Westbourne Gardens, Folkestone.)
 by order of A.S.M.S. Canadian
 for the purpose of examining and reporting upon the present state of health of
 (Rank and Name) Let G. Lilly (Corps) 12 Res
 Age 20 Service 18/12 Disability Lonsalitis
 Date of commencement of leave granted for present disability 11-4-17
 Date on which placed on half-pay for present disability _____

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

This officer has today been discharged as Chevalescent from Westcliff Hosp. He is weak & run down & requires a short leave of 7 to recuperate.

12th Res. Batt.

do

C.O.

If the Officer is not fit for General Service:-

- a. Is he fit for Garrison Duty abroad? no
- b. Is he fit for duty on the lines of communication? no

The opinion of the Board upon the questions herein is as follows:-

- (1.) a. Is the officer fit for "General Service"? no
- b. If not so fit, how long is he likely to be unfit? 10 days
- (2.) a. If unfit for General Service, is he fit for service at home? no
- b. If not so fit, how long is he likely to be unfit for service at home? 10 day
- c. If unfit for General Service at home, is he fit for light duty at home? no
- d. If not so fit, how long is he likely to be unfit for light duty at home? 10 day
- (3.) Was the disability contracted in the service? yes
- (4.) Was it contracted under circumstances over which he had no control? yes
- (5.) Was it caused by military service? yes
- (6.) If caused by military service, to what specific conditions is it attributed? Exposure & Infection
- (7.) If the disability was not caused by military service, was it aggravated by it? _____

Signatures

W. M. ...
W. M. ...
 I concur in the findings of the Board of Medical Officers
 Major D. ...
 President
 Members.
 Canadian Contingent

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station London.

Date 20-2-18.

- 1. Rank and Name LT. TILLY George.
- 2. Unit 75th Battn.
- 3. Age 20 4. Total Service 30 mos. War Service { (a) at home 10 mos.
(b) abroad 20 "
- 5. Address Bank of Montreal.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability G.S.W. L. Leg.
- 7. Date of origin of disability 9-1-18.
- 8. Place of origin of disability MERICOURT.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

T. & T. wound left calf; wound was excised and sutured and healed by primary union..

M.C.S. reports he had a gas burn (mustard) of right groin.

He had tonsillitis 5-2-18, and an abscess of left tonsil discharged.

HOSP.30 F.A.9-1-18. 2nd Western Gen., Manchester 13-1-18.

OPINION OF THE MEDICAL BOARD.

- NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.
- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No.
(b) in the service? Yes.
- 11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? SHREPNEL, SHELL GAS

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions?

I concur in the findings of the Board of Medical Officers here recorded.
W. J. Wilmaney
Captain, D.A.D.M.S.
for D.M.S. Canadians.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? N.A.

14. What is the officer's present condition? ^{is} General condition/good; He has not been sleeping well while he has been in Hospital. Wound of the calf is well healed, he walks a little lame. There is an area of anaesthesia below the wound. The burn of the groin is now healed, but the scar is tender.

RECOMMENDATION: THREE WEEKS LEAVE

15. To what degree is the officer disabled at the present time? NA. ---
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? 3 weeks in future.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? None.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.
- A.—Fit for general service..... No - two months.
 - B.—Fit for service in a garrison or labour unit abroad. No - two months.
 - C.—Fit for home service :—
 - (i) Active duty with troops. No - one month & three weeks.
 - (ii) Sedentary employment only. Ne - three weeks.
 - D.—For admission to a command depot.
 - E.—Requiring indoor hospital treatment :—
 - (i) In an officers' military or auxiliary convalescent hospital.
 - (ii) In an officers' hospital.
 - F.—Permanently unfit for any further military service.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with? N.A.

S. H. MCCOY MAJOR CAMC. President.

G. H. WILSON MAJ. CAMC.

F. E. ROGERS CAPT. CAMC. } Members.

VEP

8 T 144

CONFIDENTIAL.

Army Form A. 45.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station 13 Berners St - London

Date 14-3-18

- 1. Rank and Name LT. MILLY (GEORGE)
- 2. Unit 16th Bn - 4th Res Bn
- 3. Age 20 4. Total Service 30/12 War Service { (a) at home 10 months
(b) abroad 20 months - France 10 months
- 5. Address 6 Fernside St -

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability G.S.W. - L. LEG
- 7. Date of origin of disability 9.1.18
- 8. Place of origin of disability Wiercourt-
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

This officer reports, after three weeks leave - He has improved very much since last Board

I concur in the findings of the Board of Medical Officers recorded
W. J. Edmell
Captain, D.A.D.M.S.
for D.M.S.
Canadians

OPINION OF THE MEDICAL BOARD.

- NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.
- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? no
- (b) in the service? Yes
- 11. Was it attributable to military service? Yes
- If so, to what specific military conditions is it attributed? Shrapnel - Shell gas

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? na
- If so, by what specific military conditions? na

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? na

14. What is the officer's present condition?

States he has no pain in the leg & no difficulty in walking. Pulse normal. General condition good

The Board recommended fit for GS

15. To what degree is the officer disabled at the present time? _____
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 20, under 20, or nil.)

16. Is the disability permanent? *no*

17. If not permanent, how soon is re-examination recommended? _____ months.

18. Is it necessary that the officer should be re-examined by the same Board? *no*

19. What treatment is the officer receiving, and where, and from whom? *none*

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? *no*

21. Does the officer require the constant attendance of another person? *no*

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service. _____
- B.—Fit for service in a garrison or labour unit abroad. _____
- C.—Fit for home service :—
 - (i) Active duty with troops. _____
 - (ii) Sedentary employment only. _____
- D.—For admission to a command depot. _____
- E.—Requiring indoor hospital treatment :—
 - (i) In an officers' military or auxiliary convalescent hospital. _____
 - (ii) In an officers' hospital. _____
- F.—Permanently unfit for any further military service. _____

Yes

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with? *na*

J. W. McIntosh Capt. Comd. President.
L. W. Macdonald Maj. Comd.
G. H. Anderson Capt. Comd. Members.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.C.O.H. Matlock Bath. Derbys.

Date 26-10-18.

- 1. Rank and Name LIEUT. TILLEY: GEORGE,
- 2. Unit 75th Can. Bn. 1st C.O.R.D. Witley. Surrey.
- 3. Age 21 4. Total Service 36 Mos. War Service { (a) at home 9 Mos.
(b) abroad France 16 Mos.
- 5. Address 12th Can. Res. Bn. Witley. Surrey.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability G.S.W. ARM. L. (FRACT. HUMERUS).

7. Date of origin of disability 2-9-18.

8. Place of origin of disability France.

9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.):—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

T.&T., bullet wound of upper 3rd arm left with comminuted fracture of humerus. Wound cleaned. No operation. Evacuated to No.4., S. General Hospital, Plymouth, 6-9-18. To C.C.O.H., 10-10-18. Wds., healed. Some wasting, & muscle weakness. Union good.

I concur in the findings of the Board of Medical Officers here recorded.
Major, D.A.D.M.S.
For D.M.S. Canadian Contingents.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) The Board will on no account inform the officer of its opinion on any of the following questions.

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably" should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No.
(b) in the service? Yes.
- 11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? Bullet wound.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

14. What is the officer's present condition? Generally good. Heart and Lungs sound
Wound healed. Union of fracture good. Joint movements left arm
good. There is still some muscle weakness but this is improving
and he should be fit again for service after his leave.

15. To what degree is the officer disabled at the present time? _____
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50,
40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? _____ months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? Massage & Rem. Gym.,
at Canadian Convalescent Officers' Hospital,
Matlock Bath, Derbys.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service Yes.

B.—Fit for service in a garrison or labour unit abroad N.A.

C.—Fit for home service:— N.A.

(i) Active duty with troops N.A.

(ii) Sedentary employment only N.A.

D.—For admission to a command depot N.A.

E.—Requiring indoor hospital treatment:— N.A.

(i) In an officers' military or auxiliary convalescent hospital N.A.

(ii) In an officers' hospital N.A.

F.—Permanently unfit for any further military service N.A.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? N.A.

A.C. Rankin, Lt. Col. C.A.M.C. President.

W.J. McAlister, Major. C.A.M.C.

H.A. Mitchell, Capt. C.A.M.C. } Members.

"C".

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station Marion Bath Quarry
Date 26-10-15.

- 1. Rank and Name Lt. Tilley George
- 2. Unit. 7th Bn - 1st C.O.B. & Witley
- 3. Age 21 4. Total Service 36 War Service { (a) at home 9
(b) abroad France 16
- 5. Address 12th Pls. Bn. Witley

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability S.S.W. ARM L. (FRACT. HUMERUS)
- 7. Date of origin of disability 2-9-15.
- 8. Place of origin of disability France.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.):—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

T. & T. bullet wound of upper 3rd. Arm L. with comminuted fract. of humerus. Wound clean. No operation. Evac. to No 4 S. Gen. H. Plymouth 6-9-15. To C.C. etc. 10-10-15. Was healed. Some weakness & muscle weakness. Union food.

I concur in the findings of the Board of Medical Officers here recorded.
[Signature]
Major, D.A.D.M.S.
For D.M.S. Contingents.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No
(b) in the service? yes
- 11. Was it attributable to military service? yes
If so, to what specific military conditions is it attributed? Bullet wound.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

14. What is the officer's present condition? Generally good.

Fracture of humerus sound. Wound healed.
Union of fracture good. Joint movements fair.
good. There is still some muscle weakness but this
is improving & he should be fit again for service
after 12 weeks.

15. To what degree is the officer disabled at the present time? —
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent? No

17. If not permanent, how soon is re-examination recommended? — months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? massage &
New Spas. C. C. M.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service Yes
- B.—Fit for service in a garrison or labour unit abroad Yes
- C.—Fit for home service :—
 - (i) Active duty with troops Yes
 - (ii) Sedentary employment only Yes
- D.—For admission to a command depot Yes
- E.—Requiring indoor hospital treatment :—
 - (i) In an officers' military or auxiliary convalescent hospital No
 - (ii) In an officers' hospital No
- F.—Permanently unfit for any further military service No

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? —

A. C. M. L. C. Allen President.
H. Mitchell Capt. Members.

Ward B 4 Hydepark Hospital. No. of Bed _____ Date 9-9-18

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
	<u>Lt Tolley</u>	<u>75 Canadian</u>	<u>g-s w sup arm</u>

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

*Condition of
Super Humeral
epiphysis*

Ellis

MAJOR, R.A.M.C.,
O.C. HYDE-PARK SECTION,
4TH SOUTHERN GENERAL HOSPITAL,
PLYMOUTH.

Signature of M.O. *J.P. [unclear]*
Date 9/9/18

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 6944.

*Communion of shaft of humerus at
the junction of middle & upper thirds.
There appear to be one or two small
sequestra present.*

The alignment is good

Signature of Radiographer *F.H. [unclear]*
Date 20/9/18



Casualty Form - Active Service

Regiment or Corps 75 Canadian Infantry Bn.
 Rank Lieut Surname Silly Christian Name Thomas George
 Religion..... Age on Enlistment..... years..... months
 Enlisted (a)..... Terms of Service (a) 2 & 1 mo Service reckons from (a) 23.7.16
 Date of promotion to present rank..... Date of appointment to lance rank.....
 Extended {.....} Re-engaged {.....} Qualification (b).....
 or Corps Trade and Rate.....
 Occupation Bank clerk Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
5.7.18.	20 Genl.	G. S. H. arm. M.	To England.	5.7.18.	H 6695.
5.9.18	Pl. H.S.	Injured (Wounded) and			
	"	held at Regt. detached to 1st Cent. Ont.		5.9.18	AGM 2091 5929
		Regt. depots, Willey.	Base		R.D. 95.
		<i>J. M. Underwood</i>			
		Lieut. for Lt Col. A. A. G.			
		in Section, G. H. Q. - 3rd. Ech.			
15.9.18	1st G.O.R.O.	N.O.S. on evacuation and	Willey	8.9.18	R.D. 254
		shown as a patient in			
		Hospital.			

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c
 (17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.) **I.P.T.O.**

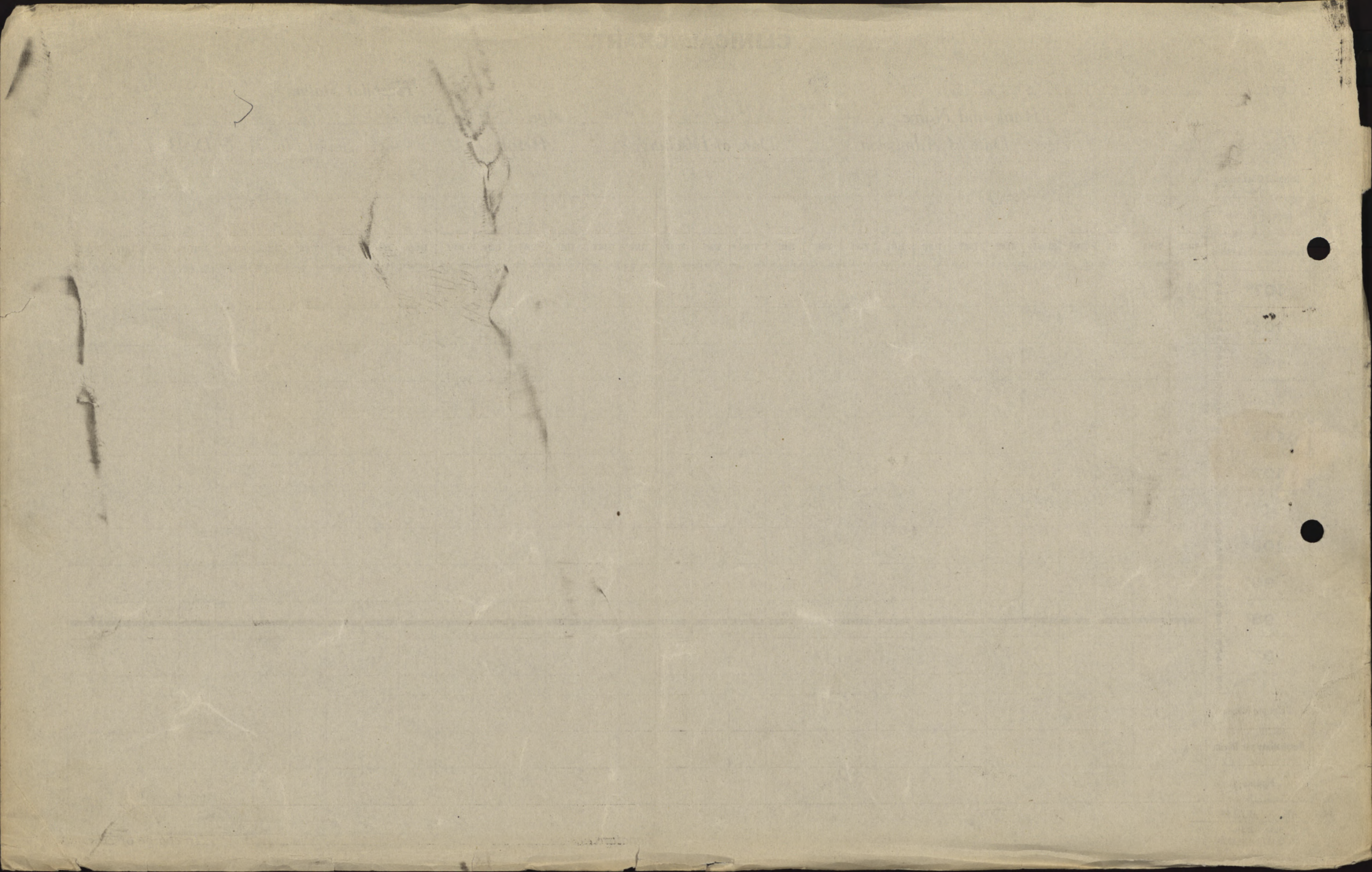
Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36 or other official documents
Date	From whom received				
5.11.18	1st CORN.	Account in Hospital. under S.O.S. on posting to 12th Res. Bn.	Witley A. J. Johnson	21.10.18	RA 110.307.....LIEUT. OFFICER i/c RECORDS,
8.11.18	12 th Res. Bn.	T-O-S. 12 th Res. Bn.	Witley	31.10.18	Pt II 266.
4.12.18	12th Res.	S.O.S. to 1st C.O.R.D.	Witley H. Sainsbury	3.12.18	Pt. II 288 Ident. i/c Records 12th Res. Bn. C.E.F.
9/12/18	1st CORN	TDS from 12 th Res Bn detached to HQ BN Lt C pending R.T.C	Witley	3/12/18	NO 341
7/1/19	1st CORN	heavily wounded detached to HQ Lt Coy transfer to b.c. in Canada.	Witley J. Pearce	5/12/18	NO 5.....LIEUT. OFFICER i/c RECORDS,

CLINICAL CHART.

Corps St. Andrew's Hosp. Hospital Station Toronto
 No. — Rank and Name Lieut Tilly Geo. Age 22 Service C 9/12 E 9/12 F 30
 Disease Papilloma of Nasella Date of Admission 6-12-19 Date of Discharge FEB 4 1920 Result Recovery Serial No. A. & D. Book Ja-12

Dates of Observation <i>See 7 8 9 10</i>	7		8		9		10																															
	TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME			
Days of Disease	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.		
Temperature Fahrenheit																																						
107°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
106°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
105°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
104°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
103°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
102°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
101°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
100°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
99°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
98°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
97°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Pulse per Minute	74		74		76		74																															
Respirations per Minute	18		18		17		18																															
Motions																																						

Signature A. B. Ritchie In charge of case.



CANADIAN EXPEDITIONARY FORCE

S.M. 2-20.
L.B.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank)..... Lieutenant.

(Name in full)..... Thomas George TILLY. M.C.

Enlisted in..... The 109th Battalion.

CANADIAN EXPEDITIONARY FORCE, on the.....

day of..... 191..... AND WAS APPOINTED to COMMISSIONED RANK

in..... The 109th Battalion.

CANADIAN EXPEDITIONARY FORCE on the..... sixth..... day

of..... December..... 191 5.

He SERVED in CANADA, England and France, with the 109th Bn.,
Attached 134th Battalion., 12th Reserve Battalion., 75th Battalion
1st Central Ontario Regimental Depot., 3rd Detachment, C.G.R.
and D.D.#3.

and was STRUCK OFF THE STRENGTH on the..... Twenty-third...... day

of..... June..... 191..... by reason of..... General Demobilization.

Dated at Ottawa, this..... First...... day

of..... March..... 191..... 1920.

Awarded the Military Cross, L.C.#31158, - 1-2-19.

Wounded, - 6-6-17.

" 9-1-18.

" 2-9-18.

for..... Capt.

Director of Personal Services.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to certify that (Rank)

Name in full

Number

CANADIAN EXPEDITIONARY FORCE on the

day of AND WAS APPOINTED TO COMMISSIONED RANK

in

CANADIAN EXPEDITIONARY FORCE on the

day of

HE SERVED IN CANADA

and was STRUCK OFF THE STRENGTH on the

day of by reason of

Died at Ottawa, this

day of

Director of Personal Services

DEPARTMENT OF VETERANS AFFAIRS

Dept. of Veterans Affairs
 War Service Records
 JAN 29 1962
 Referred to
 Charged to

Ottawa Ont

Jan 26/62

To ● Copy for H.O. FILE

Attention of

NAME TILLY, Thomas George.

SERVICE Major. ACT
 NUMBER Lieut. CEF

CPC. 137461
 C.P.C. No. 801126
 W.V.A. No.

NAVY
 ARMY X
 R.C.A.F.

The DEPARTMENT has received information from

T. Tilly. 1117 N. 19th Ave., Hollywood Fla. U.S.A. Jan 20/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death.....Jan 18/62.....
 Cause of Death.....
 Place of Death.....Hollywood Florida, USA.....

Name and Address of next of kin (if known).....

Copies to: W.S.R.
 V. I.
~~PAY~~
 D.O.F.R.D.
 H.O.
 ACCTS-4

} Destroy form if advice of death already received.

for *m j wynn*
 Chief, Central Registry

Casualty Form - Active Service

Regiment or Corps..... *75th Bn 109 Bn Victoria*

Rank *Private* Surname *Dilly* Christian Name *George*

Religion..... Age on Enlistment..... years..... months

Enlisted (a)..... Terms of Service (a) *2 yrs* Service reckons from (a) *23.7.16*

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended (.....) Re-engaged (.....) Qualification (b) *Bank Clerk*
or Corps Trade and rate.....

Occupation..... Signature of Officer.....

RECEIVED CORPUS
 3 JUL 1918
 CASUALTY RECORD OFFICE

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty.	Remarks Taken from Army Form B.213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...	<i>Canada</i>	<i>23.7.16</i>	
		Disembarked ...			
<i>13/1/18</i>	<i>24 Gen.</i>	<i>AS. M. Reg. Co. to H.B. P. de Connet</i>	<i>England</i>	<i>13/1/18</i>	<i>M 78 C. 7870 M 3083/4729 D.O. 5</i>
		<i>Detached to First Cent. Anti Reg. Dep.</i>	<i>Shorecliffe</i>	<i>do</i>	
			<i>has B. Chapell</i>		<i>Lieutenant, for Col. G. G. G. C. Sec. 3rd Div. 240.</i>
<i>21. 1. 18</i>	<i>1st C.O.R.D.</i>	<i>T.O.S. 1st C.O.R.D.</i>	<i>West Sandling</i>	<i>13.1.18</i>	<i>Pt. II D.O. No. 21</i>
<i>20.3.18.</i>	<i>1st C.O.R.D.</i>	<i>S.O.S. on reporting to 12A.</i>	<i>West Sandling</i>	<i>16.3.18</i>	<i>Pt. II D.O. No. 77</i>

(*) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shilling-Smith, &c.
 W. 8625 - M2733 2000 9/17 (3-6-17) C. P. & S., Ltd., Form B. 103 B/1897. P.T.O. Adjt.

for O. G. 1st C. O. R. D.

Lieut. Kelly, J. G.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A. 36, or other official documents.
Date	From whom received				
19.3.18	12 cl/Don.	F-1-S 12 th Res Bn.	Witley	16.3.18	Part II 67
16.4.18	do.	S.O.S. 6 75 th Bn	Witley	15.4.18	Part II 91
23/4/18	75 th	Taken on strength	Field	17/4/18	no. 29.
19/4/18	CCRD	S.O.S. to CCRD	do	19/4/18	NR
do.	CCRC	J.O.S. - Retained at Cad. Corp. School	do	do	NR. 2/535
6.5.18	do.	J.O.S. To 59 C.C.S.	do.	4.5.18	B. 976
4.5.18	59 C.C.S.	Influenza	adm	4.5.18	6.9356
13.5.18	b. b. R. b.	J.O.S. from 59 b. b. S.	Field	12.5.18	B/E 1168
12.6.18.	do.	S.O.S. to 75 th Batters	Field	12.6.18	NR 1012
15.6.18	Unit.	Joined unit from C.C.R. b	Field	13.6.18	B.213
7.7.18	13 b. 2 a.	Balanites.	adm	6.7.18	3399
7.7.18	do	do.	adm + ^{clerk} b. b. S.	6.7.18	3399 627.
7.7.18.	4 ^{clerk} C.C.S.	do.	adm	6.7.18.	9.1056.
6.7.18.	unit.	To send amb. (BUNK)	Field.	6.7.18	B. 213 100-62 at-15 th 18.
13.7.18	Hedw. C. C.S.	Balanites	Remaining	8.7.	91944.
20.7.18.	Hedw. C. C.S.	do	Remaining		93576.
27.7.18	do.	do	To duty.	26.7.18	95263
3.8.18	unit.	Repaired from Hospital	Field.	26.7.18.	B.213
3.9.18.	Unit.	Evac. Wounded.	Field	2.9.18.	Letter L21 and D.O. 90.
29.18	can C.S.	S.W. Arm (L)	Adm	2.9.18	} H5248
		To 27 as		2.9.18	
29.18.	As General.	S.W. arm left	adm	2.9.18.	N5762

Lieut. J. G. Kelly
12th Res. Bn. C.M.F.

Fill in Only.—Unit, Number, Rank and Name.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-50-920.

CERTIFIED CORRECT

8 - MAY 1917

Casualty Form—Active Service.

CANADIAN RECORD OFFICE

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.

Regimental No. _____ Rank Lieut. Name Jilly Thomas George

Enlisted (a) 25/7/16 Terms of Service (a) D.O.W. Service reckons from (a) 25/7/16 23/7/16

Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended _____ Re-engaged _____ Qualification (b) Civil: Bank Clerk

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		<u>Embarked Canada</u>	<u>Halifax</u>	<u>22.7.16.</u>	
		<u>Disembarked England</u>	<u>Liverpool</u>	<u>31.7.16.</u>	
<u>22-12-16</u>	<u>O.C. 109th.</u>	<u>Attached to 134th. Btn.</u>	<u>Witley</u>	<u>22-12-16</u>	<u>D.O.Pt.11 348</u> <u>Authentic Capt.</u> <u>ADJUTANT</u> <u>109th Overseas Battalion, C. E. F.</u>
<u>21-12-16</u>	<u>O.C. 134th</u>	<u>Attached from 109th Btn</u>	<u>Witley</u>	<u>20-12-16</u>	<u>Part II D.O.# 297</u>
<u>10-3-17</u>	<u>O.C. 134th</u>	<u>bases to be attached to 134th Btn</u>	<u>Witley</u>	<u>10-3-17</u>	<u>Part II D.O.# 69</u>
<u>14.3.17.</u>	<u>12th</u>	<u>S.O.S. 12th Res Bn</u>	<u>East Sandling</u>	<u>10.3.17</u>	<u>Part II 67.</u>
<u>1.5.17.</u>	<u>12th</u>	<u>S.O.S to 75th Bn</u>	<u>"</u>	<u>1.5.17</u>	<u>Part II 110.</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

109th Overseas Battalion, C. E. F.
12th Res. Bn. C. E. F.

Lieut. J. G. Tilly

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
11/5/17	A.A.S.	T.O.S. - 75th	Field	3/5/17	D.O. 72.
5/5/17	C.R.D.	Left for 4th Ent. Bn.	do.	5/5/17	M. Roll.
8/5/17	4th Ent. Bn.	T.O.S. - 4th Ent. Bn.	do.	7/5/17	do.
22/5/17	do.	Left for Unit	do.	22/5/17	do.
26/5/17	Unit	Joined Unit	do.	do.	B. 213, Dec. 154
10/6/17	A.S. S.A.O.	Wounded	do.	8/6/17	Gas list 1012; Dec. 156.
do	24 Gen.	Saw shell L. Ankle (sl)	24 Gen.	10/6/17	W. 3034/2624
9/6/17	12 C.A.	(W) SW. ankle (L)	12 C.A.	9/6/17	A/36/E/4514
15/7/17	4 C.D.B.D.	J.O.S. 'A' (from Hospital)	6 C.C.	do.	Dec. 161
23/7/17	do.	Left for 4th Ent. Bn.	4 C.D.B.D.	15/7/17	Tel. 16670.
25/7/17	4th Ent. Bn.	J.O.S.	Field	23/7/17	M. R.
12/8/17	do.	Despatched to Unit	do.	25/7/17	do.
25/8/17	Unit	Rejoined Unit	do.	12/8/17	do.
29/9/17	do.	Gas Course at Can. Gas School	do.	do.	B. 213 Dec. 179
do.	do.	Rejoined Unit	do.	23/9/17	B. 213 DO. 116.
6/10/17	do.	10 days' leave	do.	28/9/17	B. 213. D.O. 117.
20/10/17	do.	Rejoined Unit	do.	17/10/17	B. 213.
3/11/17	do.	Atta. Gen. Course, Can. Corps Sch.	do.	25/10/17	B. 213. 11th C.D.B. Gas list at 25/10/17; DO. 125
4/12/17	do.	Rejoined from Course	do.	24/11/17	B. 213. DO. 136.
11/1/18	A.S.S.A.O.	Wounded	do.	9/1/18	Gas list 1226.
14/1/18	136. 7. a.	S.W. leg. R.	{Adm. 136. 7. a.}	9/1/18	A/6122-C. 7780
9/1/18	30 C.C.S.	do.	{To 30 C.C.S.}	9/1/18	A/6168- do.
12/1/18	Unit	do.	30 C.C.S.	9/1/18	B. 213.
do.	24 Gen.	do.	Field	do.	W. 57-C. 7873.
			24 Gen.	12/1/18	

To be made out in duplicate.

DUPLICATE
H.C. 51-11-20-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....

109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number

(3) Full Name of Soldier.....

Thomas George Jilly

(4) Place of Birth.....

Port Hope Ont. Can.

(5) Are you married, or not?

No

(6) If married, state,

(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower?

(8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive? *Yes.*

If so, state name and address *J. G. Jilly Lindsay Ont*

(10) Is your Mother alive? *Yes*

If so, state name and address *Emily Frances Jilly Lindsay Ont*

(11) If your Mother is a widow *no*

Are you her sole support, or not? *No*

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured? *no*

If so, in what Company? *no*

Have you made arrangements for payment of your Insurance premium? *no*

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date *JUL 14 1916*

[Signature]
Lt. Col.
O. C. 109th Overseas Battalion, C. E. F.
Officer Commanding

CASE HISTORY SHEET.

3

Kingston General Hospital.

Tilley - G (M.C.)

Station.

No. Rank Lieut. Name Tilley, George. Age 21

Unit #3 C.G.R. Completed years of service 14 1/2 Where and how long Can. Eng. Force

Date of admission March 3, 1919. Date of discharge May 29, 19

Diagnosis Nephritis. Place of origin Canada.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Physically well developed and fairly well nourished. Height 5' 10", weight 165. Is slightly anaemic.

Chief Complaint: Feeling of malaise, Haematuria and Myalgia; also has indistinct vision. Wound in leg and knee.

Previous History: Has had attacks of Tonsillitis.

Personal History: Does not touch drugs, and is moderate with Tea, Tobacco and Alcohol.

Alimentary System - Normal.

Respiratory System - Normal.

Heart and Lungs - Normal.

Urinalysis - Trace albumen, epithelia, pus cells, R.B.C.

Blood Pressure - 125 - 70.

April 9/19. Tonsillectomy.

" 28/19. Cartilage in right knee became loose.

May 1/19. Pharyngitis; in bed three days.

" 3/19. Blood in urine again.

" 4/19. Urinalysis - phosphates and few pus cells.

FAMILY HISTORY M.A.W. F.A.W. Tuberculosis, Cancer, Syphilis

(Tuberculosis, mental or nervous diseases.) and Insanity - Negative.

TREATMENT Milk diet.

(Especially any specific or special form.) Diet without eggs.

Urotropin gr. v. OH₄

For loose cartilage, rest of leg for three days.

Tonsillectomy April 9/19.

CONDITION ON DISCHARGE Urinalysis normal.

(and disposal made of case.) Functional Nephritic test shows normal findings. No

fixity of sp. gr., no retention of water or chloride, no increase in

States that he lacks energy. night urine.

Date

J. J. Sparks
Medical Officer i/c case.

931692

1. Name: _____
2. Sex: _____
3. Age: _____
4. Date of Birth: _____
5. Date of Admission: _____
6. Room: _____
7. Location of Origin: _____

8. Chief Complaint: _____
9. History of Present Illness: _____
10. Past Medical History: _____
11. Family History: _____
12. Social History: _____

13. Physical Examination: _____
14. Laboratory Studies: _____
15. Radiology: _____
16. Pathology: _____
17. Microbiology: _____
18. Immunology: _____

19. Differential Diagnosis: _____
20. Final Diagnosis: _____
21. Treatment: _____
22. Prognosis: _____

23. Discharge Summary: _____
24. Follow-up: _____
25. Comments: _____

26. Physician's Signature: _____
27. Date: _____
28. Hospital Name: _____
29. Address: _____
30. City: _____
31. State: _____
32. Zip: _____

Name

H. Lilley G.

M. F. W. 41
1004-1-18.
1772-39-889.

YMC

copy

Regimental No.

Name and address of next-of-kin

Unit

1602

Date of enlistment

Place of

Married (yes or no)

No

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount						No.	Date
	<i>Dec</i>													
<i>Jan</i>			<i>7</i>			<i>+</i>						<i>27</i>		<i>No. 20247 out 16.12.18 20247 all cancelled 20 4.</i>

TRANSFER

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary 12th Reg. Bn. Pay 2.00
 Address 16. O. R. D. F.A. 1.00
 Messing 1.00
 Amount \$ ~~3.00~~
 Separation Allowance issued. Yes or No..... *Ad of Allee 1/18*

DATE 31/7/16
 AUTHORITY *From Canada*
20125 C.T.O. 7/16

Name *Tilly*
 Initials *Geo.*
 Bank *of Montreal.*

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918-19								
April 11	Adv. Apl. P. & A. £ 10.	Bank 334.		48 67				
16	Pay R.		108.					
24		Bank 1173.		59 32				
May 13	Pay R.		111 60					
23		Bank 7623		111 60				
June 11	June Pay R.		108 00					
22		Bank 4047		108 00				
July 14	Pay R.		111 60					
25		Bank 5625		111 60				
Aug. 16	Pay R.		111 60					
26		Bank 7207		111 60				
Sept. 15	Pay R.		108.					
26		Bank 9162		108				
Oct 16	Pay R.		111 60					
20		Bank		111 60				
31	allowance 1918		100					
		Bank 10920		100				
Nov. 19	Adv. Nov. P. & A. £ 10	Bank 11920		48 67				
21	Pay R. of A from 12/18		140					
26		Bank		91 33				
Dec 1	Pay R.		124					
1	Adv Dec P. & A.	Bank 12799		124				
5	Indem loss of kit 2/18 Direct £ 200							

Retd to Canada
R.P.C. to 31/12/18
Refer to N.E. Ledger
to £12 from £23. 9/19.
£12.4-0 \$ 37 pd in
59 full #

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

Pay

F.A.

Messing

Name

Initials

Bank

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

12th Res. Batt.

Pay 2.00
2.4. 60
Mar 1.00
3.60

DATE AUTHORITY

31-7-16. In. Can. ORD# 1225
C.D. 4/7-8-16.

Name Tilly
Initials Geo.
Bank of Montreal

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

1917

1917-18

Apr 24 Pay R

108

27

Bank 3010

108

May 24 Pay R

111 60

24

Bank 6029

111 60

June 19 Pay R

108

21

Bank 7999

108

July 18 Pay R

111 60

25

Bank 13071

111 60

Aug 24 Pay R

111 60

23

Bank 17080

111 60

Sep 12 Adv in field 4 7/17 125 for 101 43. Lill. Senay

22 30

22 30

" " " 10 7/17 125 for " 576. " " " "

22 30

44 60

18 Pay R

108

22

Bank 21908

63 40

Oct 15 Pay R

111 60

22

Bank 26284

111 60

Nov 17 Pay R

108

21

Bank 30703

108

Dec 11 Pay R

111 60

13

Bank 35096

111 60

Jan 17 Pay R

111 60

21

Bank 39441

111 60

Feb 14 Pay R

1 008 0

18

Bank 40953

1 008 0

Mar 14 Pay R

111 60

22

Bank 42598

111 60

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Name

Address

Initials

Bank

Amount. \$

Separation Allowance issued. Yes or No.....

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

311

1995

[Handwritten signature]

[Handwritten initials]

[Handwritten mark]

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

^{mess.}
DATE AUTHORITY

109th Bn.

Lieut.

31-7-16 From Canada

Name Tilly Geo.
Initials
Bank of Montreal

O.R.O.# 1225 C.J.W
d/7-8-16.

1916-17

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS.
1916	Aug 16 Bank Credit balance forward 31/7/16			40 60				
	21 Bal. for from Canada		40 60					
	21 August pay R. Messing from 31/7/16		112 60					
	24 Rk	7408		112 60				
Sep 27	Sep. pay R		108					
	Bank			108				
Oct 9	Oct pay		111 60					
	Bank			111 60				
Nov 20	Nov Pay		108					
	Bank			108				
Dec 15	Dec Pay R.		111 60					
	Bank			111 60				
1917	Jan 23 Jan Pay R.		111 60					
	Bank	19289		111 60				
Feb 17	Feb Pay R		100 80					
	Bank	21943		100 80				
Mar 21	Pay R.		111 60					
	Bank			111 60				

NAME

UNIT

ASSIGNED TO

DATE

ADDRESS

PHONE

CITY

STATE

ZIP

Separation allowed: Yes/No

DATE

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

Forms
I. 1237
12

Medical Officer:

G. Col Smith
W. H. Hays
Trane

Army Form I. 1237

Whether U.K. or Expeditionary Force:
(If latter, state which).

MEDICAL CASE SHEET.*

Ward: *B37*

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

F.C.O. 10.
Year
1918.

Unit.

Age.

Service.

75th Canadians

20

2 1/2
9/12

Station
and Date.

Disease

2. W. G. H. P.
White St
13-1-18

Date of Onset

W.S. Left leg - 10 T. calf.

9. Jay. 18 - received bullet.

Mericonst. gas burn from

transverse. Left wrist calf.

dry. healing primary union

20/1 - dry joint & vascular to fracture
(mountain bone)

Ab: 30.1.18. 6.10.15 am 31.1.18. Q. ad.

5 Feb. Toxicitis - bad headache

6 Feb. mild pyrexia pleurisy

*Feb 8. Double follicular
toxicitis
nature?*

*Transfer to Coy (or near there)
isolate*

External Comminution

*& purple urine from
combine method Soling frequently*

father J. J. Tilly

Next of kin:

*Lindsay
Ontario*

Antitetanus Inocⁿ.

Units. Date.

1500 9-1-18
500 18-1-18

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

10-2-18 Re act. Acid. No alk. No pns. No Sugar

14/2/18. Some dentis occurred.
W^o. healed.

Fitzwhean Hospital

Seams applied for ~~W^o.~~
alk.

19.2.18 Dis. Gen. Med. Board
alk

Presby

MEDICAL CASE SHEET.

WEST CHIEF CANADIAN EXP AND
EAR HOSPITAL FOLKESTONE

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

579
Year
1917

12th Res Bn

Unit.

Lieut Lilley

Age.

20 yrs

Service.

18/12 UK

Station
and Date.

Disease

Mar 29th
29 MAR 1917

Tonsillitis

Sore throat two days -

general malaise. No other complaint
Has not been in France.

Tonsils much inflamed - follicles
in crypts.

Grain. 1:100 carbolic proc.
Chloroform & salts.

Aspirin pro 7 9.4.1.

Discontinue aspirin + carbolic proc.

Stop carbolic proc.

Slight redness of tonsils.

Tab. Easton Diplop t.i.d.

Tonsillitis - throat
free of inflammation. on discharge

Chloroform.

Capt. Curran

12 APR 1917

12 APR 1917

Boarded 9 10 days leave granted
wcc the Folkestone

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
HH Year		21	Tilley	George
6-9-18		Unit.	75 Can Inf Reg	Age. 21.
				Service. 2 1/2
Station and Date.	Disease <u>G. & W. Sept. Arm</u>			
6-9-18	Wounded in 2/9/18 at Dury by bullet which entered center surface of upper part of arm about 2 1/2 inches below joint & came out same level below			
	The humerus is fractured in its upper third the arm is swollen			
	The does not appear to be any laceration or rupture of nerves or vessels			
10-9-18	A T - 1	500.	137 F	
19-9-18	HTS	500	133 e	
26-9-18	ATS	500	133 e	
27/9/18	X Ray shows comminution of humerus at junction of middle & upper third one or two small sequestra showing Pott's disease			
4/10/18	Splint removed. Dressing ordered			
10/10/18	Transferred to Med Lab J.P.H.			

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
Wt. W 6604/M 2870-1,500,000-3/17-H. & Sp. (10938). Forms/I. 1237/12. (E239) [P.T.O.]

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>1241</i>	Regimental No.	Rank. <i>Lieut Kelly</i>	Surname.	Christian Name. <i>George</i>
Year <i>1918</i>	Unit. <i>75 Chapt</i>	Age. <i>21</i>	Service. CANADA. <i>9</i>	
Station and Date.	Disease <i>G.S.W. Arm - l. fract humerus</i>		FRANCE <i>16</i> TOTAL <i>36</i>	
C.C.O.H.	ONSET <i>2.9.18</i>	WHERE <i>France</i>		
MATLOCK BATH.	HISTORY OF DISABILITY. <i>T-T Bullet wound. upper 3rd arm</i>			
<i>Oct 10</i>	Ent. lat. mid line <i>2 1/2"</i> below acromion Epit opposite side same level both wds small & clear. X ray he states shows comminuted fracture of humerus. No records available - no operation Evac to 4 S. Gen H Plymouth. <i>6.9.18</i> Recovery uneventful.			
	PERSONAL AND FAMILY HISTORY. <i>nil</i>			
	PRESENT CONDITION. <i>Good</i>			
	DIGESTIVE SYSTEM. <i>OK some diarrhoea</i>			
	CIRCULATORY SYSTEM. <i>OK</i>			
	RESPIRATORY SYSTEM. <i>Lungs clear.</i>			
	NERVOUS SYSTEM. <i>Sleep 6 hr per diem</i>			
	G.U. SYSTEM. <i>OK</i>			
	LOCAL CONDITION. <i>Wds healed from bony union abduction limited no wasting voluntary movements restricted.</i>			
	Treat. <i>Baths Man. Rubetations</i>			
<i>14-10-18</i>	Much improved Extension still limited			
<i>17-10-18</i>	Amputation of extension otherwise OK			
<i>21-10-18</i>	Doing well. movements free. Little arm weakness still			
<i>26-10-18.</i>	Boarded A. <i>Specialist's maj.</i>			

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

[Faint, illegible markings]

[Faint, illegible markings]

[Faint, illegible markings]

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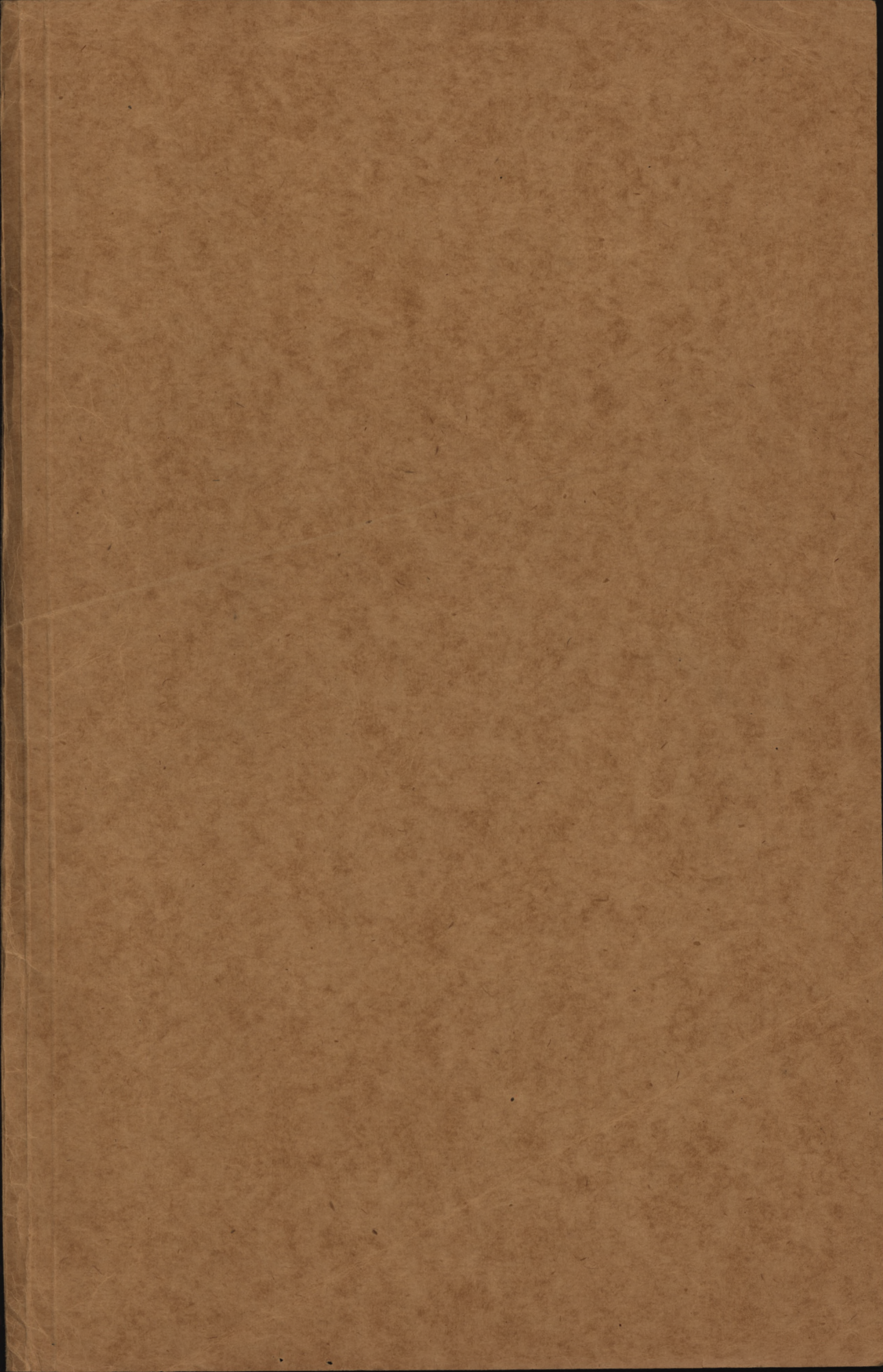
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15/8/44

LIEUT.

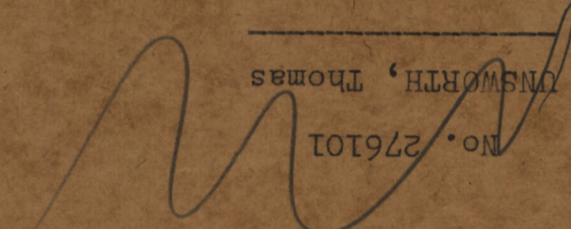
TILLEY, GEO.



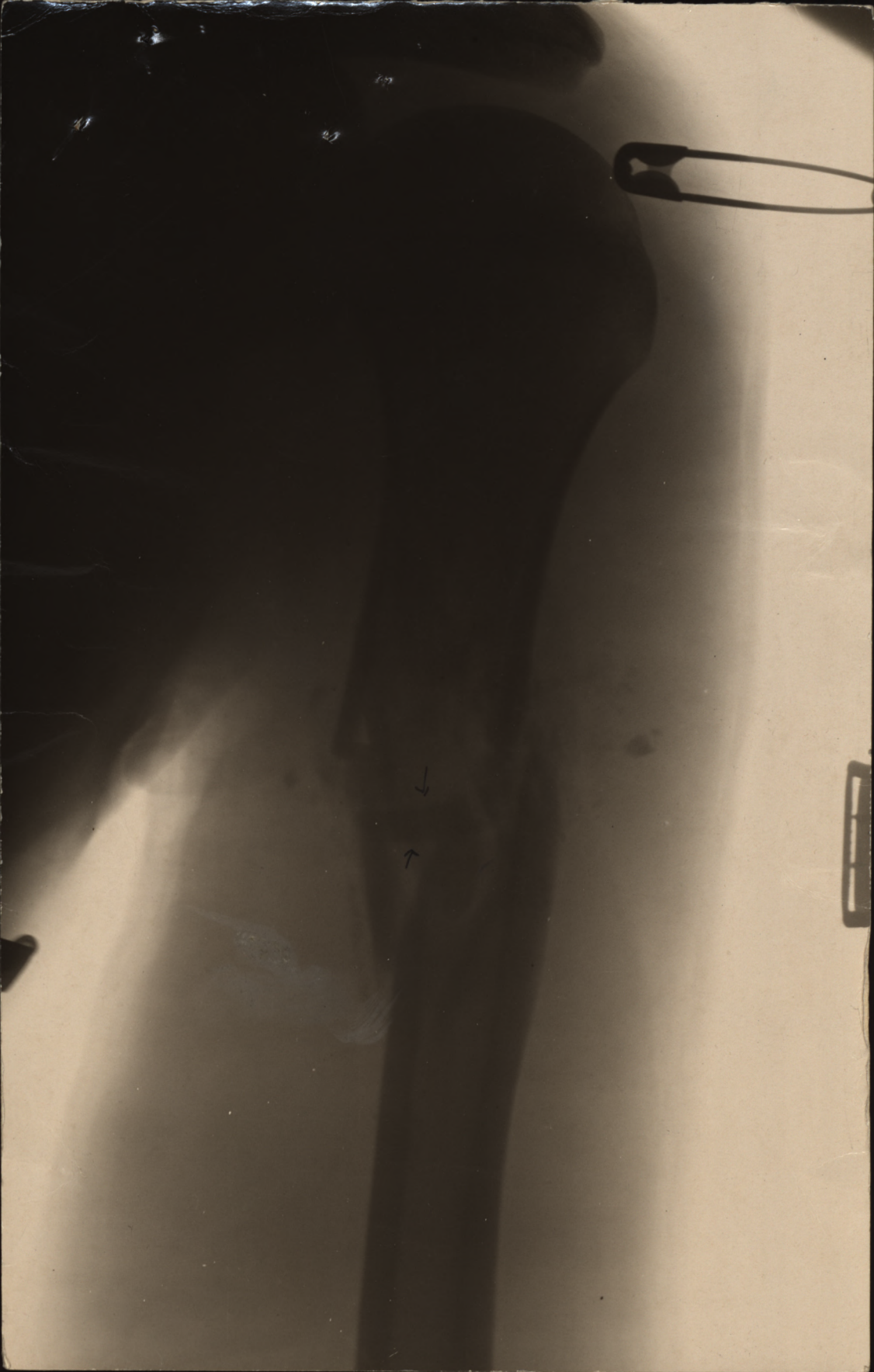


JNSWORTH, Thomas

No. 276101



2-144



X Ray Department
Military Hospital
Deseret

Plate No 6944.

Leut. Jelley Canadian
L. Am

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

MILITIA REFERENCE
 JUN 25 1919
 H.Q. CANADA

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
- The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
- In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
- The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Kingston Ont. DATE May 29th 1919

1. 1 (a) Unit 3 D.D. (b) Regimental No. (c) Rank Lieut.
 (d) Surname TILLEY (e) Christian name George
 (f) Home address Tilley Lindsay Ont.
 (g) Next of Kin T.J. Tilley (h) Relationship Father
 (i) Address of Next of Kin Lindsay Ont.

2. Age last birthday 22 Date of birth Apr. 24th 1897

3. Enlistment, or Appointment (if an Officer) (a) Place Canada (b) Date Nov. 1915

4. Personal description:
 (a) Height 5'9-3/4" (b) Weight 164 (c) Complexion fair
(stripped)
 (d) Colour of hair lt. brown (e) Colour of eyes gray (f) Identification marks, Scars, etc. Tattoo
ft forearm

5. Former trade or occupation Bank Clerk

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).

	Years	Days
	<u>3 1/2</u>	

	PERIODS	
	From	To
Canada	<u>Nov. 1915</u> <u>Dec. 1918</u>	<u>Jly. 1916</u> <u>Date</u>
England	<u>Jly. 1916</u>	<u>Apr. 1917</u>
France or other theatres of War	<u>Apr. 1917</u>	<u>Sept. 1918</u>

7. Original disease, or injury Nephritis

(a) Date of origin March 3rd 1919 (b) Place of origin Kingston Ont.
 (c) Cause Exposure

B.P.C. FOLIO
 FALSE DOCKET
3

B.P.C. FOLIO
 FALSE DOCKET

32

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some therapeutic reasons; (d) Any other restrictions in choice of occupation.)

1. Feels somewhat weak, from being confined indoors and says he lacks energy.

2. Pain in knee after walking a mile - Sharp pain when cartilage is (dislocated)

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

1. Renal condition has cleared up for the present

Urinalysis normal. Functional Nephritic test shows normal findings - no fixity of sp.gr., no retention of water or chloride and no increase of night urine.

2. Subj. Officer says he has pain in knee after walking a mile. Has a very sharp pain & is unable to walk when cartilage is dislocated. This accident occurs occasionally - say - once or twice a month. Has to be careful in using knee.

2. Obj. No objective findings on palpation.

X-Ray shows - No bony lesion visible. No loose cartilage visible.

- (b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System.....	No	Cardio-Vascular System.....	No	Genito-Urinary System.....	See above
		(If pulse rate is abnormal, B. P. will be taken.)		(Albumen and Sugar will be excluded.)	
Special Senses.....	No	Respiratory System.....	No	Integumentary System.....	No
Disturbances of Mentality.....	No	Digestive System.....	No	Muscular System.....	No
Osseous and Joint Systems.....	No	Any other general condition.....	No		

10. (a) History (of the condition referred to in Section 9 (a).)

Noticed blood in urine summer of 1918 in France but did not report it. Noticed it occasionally for a week. Again in November 1918 in England and kept up until he reported - in March 1919. There is no pain, no frequency.

After first few days there was no haematuria until attack of pharyngitis May 3rd 1919 when it was present one day. Officer was wounded Jan. 1918 by shrapnel left leg at middle of calf. Scar of wound 4" - Officer says nerve was wounded & lost sensation in this region for a time. Sensation is improved though there is still some numbness of skin below wound. Motor nerves intact.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Shrapnel wound, left ankle, June 1917

" " " " leg, Jan. 1918

Rifle bullet wound left arm, Sept. 1918

States loose cartilage rt. knee Aug. & Nov. 1917, Jly. 1918, Sept. 2/18

(c) (Here give a description of wounds, scars, and deformities.)
Dec. 1918: none reported in Medical History Sheet. Apr. 1919 reported
Tonsillectomy Apr. 9/19

11.—(a) Did the disabling condition have its origin before enlistment? 1.2. No

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

1.2. N.A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? 1.2. No

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1. Recovered 2. Permanent

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Milk diet & rest in K.E.H.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

No

16. Can the former trade or occupation be resumed? Yes, with some limitation

(If not, briefly state why)

17. Recommendations Discharged as medically unfit, with pensionable disability

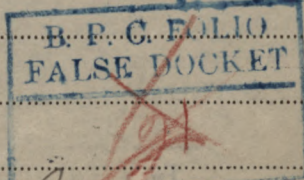
J. Sparks Captain
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of



George Lilly
Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

YES

19. Is the invalid fit for

- (a) General service, (Category A) (Yes or No.)
- (b) Service abroad, not general service, (" B) (Yes or No.)
- (c) Home service (Canada only), (" C) (Yes or No.)
- (d) Temporarily unfit. (" D) (Yes or No.)
- (e) Unfit for service in Categories A, B and C (" E) (Yes or No.)

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

as medically unfit with pensionable disability

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE Kingston

W. Gibson Captain President.

DATE May 29/19

Am. Ouellette Captain } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....
Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE.....

DATE.....

.....President.

.....} Members

APPROVED BY *W. Cray* Captain A. M. C.
For A. Assistant Director of Medical Services.

DATE JUN 22 1919

APPROVED BY *J. M. G. Cas*
Director-General of Medical Services.

DATE 28/6/19

Name: Lilly, Thomas George.

Lieut.

Unit: 75th. Bu. 1st. C.O.P.

Awarded: M.C.

Auth: R.S. # 31158.

1-2-19. *Th*

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station 13 BERNERS ST. W.1.

Date 14-3-18.

1. Rank and Name LT. TILLY (George)

2. Unit 75th Bn. 7th Res. Bn.

3. Age 20 4. Total Service 30/12 War Service { (a) at home 10 mos.
(b) abroad 20 "(10 in France)

5. Address 60. Jermyn St. 1.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability G.S.W. L. LEG.

7. Date of origin of disability 9-1-18.

8. Place of origin of disability MERICOURT.

9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

This Officer reports after three weeks leave. He has improved very much since last Board.

I concur in the findings of the Board of Medical Officers here recorded
W. J. Macdonald
Captain, D.A.D.M.S.
for D.A.D.M.S. Canadians.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No
(b) in the service? Yes

11. Was it attributable to military service? Yes
If so, to what specific military conditions is it attributed? Shrapnel Shell gas.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? N.A.

14. What is the officer's present condition? States he has no pain in the leg & no difficulty in walking. Pulse normal. General condition good.

THE BOARD RECOMMEND "FIT FOR G.S."

15. To what degree is the officer disabled at the present time? _____
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 20, under 20, or nil.)

16. Is the disability permanent? No

17. If not permanent, how soon is re-examination recommended? - months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? None

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service.Yes
- B.—Fit for service in a garrison or labour unit abroad.
- C.—Fit for home service :—
 - (i) Active duty with troops.
 - (ii) Sedentary employment only.
- D.—For admission to a command depot.
- E.—Requiring indoor hospital treatment :—
 - (i) In an officers' military or auxiliary convalescent hospital.
 - (ii) In an officers' hospital.
- F.—Permanently unfit for any further military service.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with? N.A.

J.W.McINTOSH SH CAPT. CAMC. President.

L.W.McNUTT CAPT. CAMC.

G.H.WILSON MAJ. CAMC. } Members.

NH

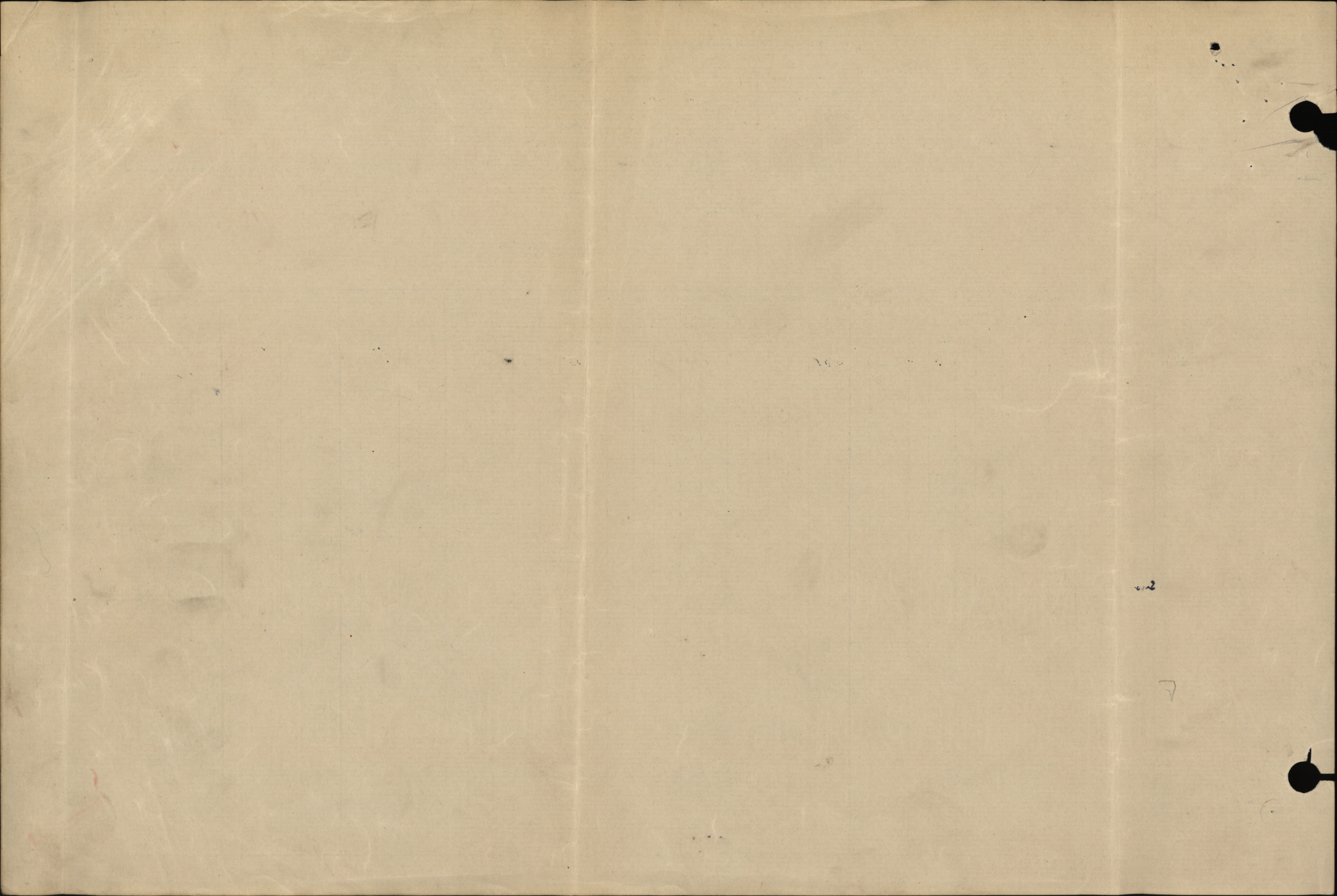
M. OR S. *S*

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
DAILY RATE OF PAY AND ALLOWANCES

REGT. No. RANK *Lieut* NAME (IN FULL) *TILLEY, George* (BLOCK LETTERS SURNAME FIRST) *3 C.G.R.*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F. <i>109th Bn.</i>	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS		<i>300 ✓</i>		<i>7 S.A.</i>	PLACE OF ATTESTATION	TRANSFERRED TO <i>No 3 Dist Depot.</i>	DATE <i>1/3/19</i>
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO	DATE
TO WHOM PAID	RELATIONSHIP	<i>Lieut George. Tilley</i>			ASSIGNED PAY \$	DATE EFFECTIVE	AUTHORITY <i>XPO-45a</i>
ADDRESS		<i>Lindsay</i>		<i>Out.</i>	PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED <i>Hingston</i>	PLACE <i>23/6/19</i>	DATE <i>23/6/19</i>
						REASON <i>MS-RC. 2063</i>	AUTHORITY <i>2063</i>
							IF ENTITLED TO POST DISCHARGE PAY

MONTH <i>1919</i>	NO. OF DAYS	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
		RATE	AMOUNT			COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	
<i>April</i>	<i>30</i>	<i>90</i>	<i>90 -</i>		<i>90 -</i>	<i>3167</i>	<i>4899</i>		<i>5000</i>	<i>40 -</i>				<i>90 -</i>				
<i>May</i>						<i>4934</i>			<i>50</i>					<i>50 -</i>	<i>50 -</i>			<i>D.O. 129. Pass to No 3 Dist Depot</i>
<i>May</i>	<i>31</i>	<i>93</i>	<i>93 -</i>		<i>93 -</i>				<i>43</i>					<i>43 -</i>				<i>D.O. 133. 272664</i>
<i>June</i>	<i>23</i>	<i>69</i>	<i>90 - 159 -</i>	<i>51 40</i>	<i>159 -</i>				<i>159</i>					<i>159 -</i>				<i>276217</i>
									<i>37 40</i>					<i>37 40</i>				<i>277499</i>
														<i>342 -</i>				<i>D.O. 205. Rebr.</i>
<i>War Service Gratuity</i>																		
				<i>W.S.G.</i>										<i>90 -</i>				<i>as above</i>
<i>183 day</i>	<i>370</i>			<i>W.S.G.</i>	<i>549 00</i>									<i>90 - 183 -</i>	<i>366 -</i>			<i>Q. 950622 JUL 18 1919</i>
														<i>40 -</i>	<i>276 -</i>			<i>Q. 1290914 AUG 14 1919</i>
														<i>90 -</i>	<i>188 -</i>			<i>Q. 1709314 17-9-19.</i>
														<i>93 -</i>	<i>90 -</i>			<i>Q. 1324388 16-70-19</i>
														<i>90 -</i>	<i>0</i>			<i>Q. 1335187 17-11-19.</i>



OPTICAL CHART

Army Form B-381

Serial Number

Date of Receipt

Date of Admission

Location

Level of
Observation

